



Washington State Department of
Enterprise Services

**REQUEST FOR TENANT ESTOPPEL SUBORDINATION NON-DISTURBANCE AND ATTORNMENT
AGREEMENT (SNDA)**

This is a request for:

State Lease Number: _____

Facility Address: _____

City: _____

_____ Tenant Estoppel: **(\$250.00 fee)**

_____ SNDA: **(\$250.00 fee)**

_____ Both: **(\$400.00 fee)**

Payment attached. ***Please note that executed documents will not be released until payment has been received.***

Requested By:

Name: _____

Address: _____

City: _____

Contact: _____

Phone: _____

Fax No: _____

Explanation: *(Please indicate purpose)*

Refinance

Purchase of leased Property in process
requested on behalf of new owner (Prospective
Purchaser)

Prospective Purchaser's Name/Address:

Purchase of leased Property completed,
Requested on behalf of new owner

Other: _____

Lender:

Name: _____

Name: _____

Address: _____

City: _____

Contact: _____

Phone & Fax: _____

**Provide the Name and Address of Entity if the
requested documents are to be sent somewhere
other than the Lender.**

Name _____

Address: _____

City: _____

Contact: _____

Phone & Fax: _____

SEND REQUEST AND PAYMENT TO:

Department of Enterprise Services, Financial Office

Attention: Rita Taipale

1500 Jefferson Street S.E., 3rd floor

Post Office Box 43274

Olympia, Washington 98504-3274

Contact: robin.atwood@des.wa.gov

Phone: (360) 407-9308

Fax: (360) 586-9088

OR

cathy.schilling@des.wa.gov

(360) 407-9307

(360) 586-9088